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PTO/SB/05 (05-03)

Approved for use through 10/31/2002. OMB 0651-0032

U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

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UTILITY PATENT APPLICATION TRANSMITTAL

(Only for new nonprovisional applications under 37 C.F.R. 1.53(b))

Attorney Docket No. 4447-000013

First Inventor George S. Reppas, et al.

Title CONVERTIBLE FURNITURE

Express Mail Label No. EL 623 309 692 US

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APPLICATION ELEMENTS

See MPEP chapter 600 concerning utility patent application contents.

1. <input checked="" type="checkbox"/> Fee Transmittal Form (e.g., PTO/SB/17) (Submit an original and a duplicate for fee processing)	7. <input type="checkbox"/> CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix)
2. <input checked="" type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27.	8. Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary)
3. <input checked="" type="checkbox"/> Specification [Total Pages 23] (preferred arrangement set forth below)	a. <input type="checkbox"/> Computer Readable Form (CRF)
- Descriptive title of the Invention <input checked="" type="checkbox"/>	b. Specification Sequence Listing on:
- Cross References to Related Applications <input checked="" type="checkbox"/>	i. <input type="checkbox"/> CD-ROM or CD-R (2 copies); or
- Statement Regarding Fed sponsored R & D <input type="checkbox"/>	ii. <input type="checkbox"/> paper
- Reference to sequence listing, a table, or a computer program listing appendix <input type="checkbox"/>	c. <input type="checkbox"/> Statements verifying identity of above copies
- Background of the Invention <input type="checkbox"/>	
- Brief Summary of the Invention <input type="checkbox"/>	
- Brief Description of the Drawings (if filed) <input type="checkbox"/>	
- Detailed Description <input type="checkbox"/>	
- Claim(s) <input type="checkbox"/>	
- Abstract of the Disclosure <input type="checkbox"/>	
4. <input checked="" type="checkbox"/> Drawing(s) (35 U.S.C. 113) [Total Sheets 7]	
5. Oath or Declaration [Total Pages 4]	
a. <input checked="" type="checkbox"/> Newly executed (original or copy)	9. <input checked="" type="checkbox"/> Assignment Papers (cover sheet & document(s))
b. <input type="checkbox"/> Copy from a prior application (37 CFR 1.63 (d)) (for a continuation/divisional with Box 18 completed)	10. <input type="checkbox"/> 37 C.F.R. §3.73(b) Statement <input type="checkbox"/> Power of (when there is an assignee) Attorney
i. <input type="checkbox"/> DELETION OF INVENTOR(S) Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b).	11. <input type="checkbox"/> English Translation Document (if applicable)
6. <input checked="" type="checkbox"/> Application Data Sheet. See 37 CFR 1.76	12. <input checked="" type="checkbox"/> Information Disclosure Statement (IDS)/PTO-1449 <input checked="" type="checkbox"/> Copies of IDS Citations
	13. <input type="checkbox"/> Preliminary Amendment
	14. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503) (Should be specifically itemized)
	15. <input type="checkbox"/> Certified Copy of Priority Document(s) (if foreign priority is claimed)
	16. <input type="checkbox"/> Request and Non Publication under 35 U.S.C. 122 (b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent.
	17. <input type="checkbox"/> Other: _____

18. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment, or in an Application Data Sheet under 37 CFR 1.76:

Continuation Divisional Continuation-in-part (CIP) of prior application No: _____ / _____

Prior application information: Examiner _____ Group / Art Unit: _____

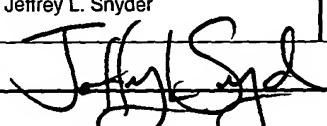
For CONTINUATION or DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

17. CORRESPONDENCE ADDRESS

<input checked="" type="checkbox"/> Customer Number or Bar Code Label	27572	<input type="checkbox"/> or <input type="checkbox"/> Correspondence address below
---	-------	---

(Insert Customer No. or Attach bar code label here)

Name	Harness, Dickey & Pierce, P.L.C.				
Address	P.O. Box 828				
City	Bloomfield Hills	State	MI	Zip Code	48303
Country	United States of America	Telephone	248-641-1600	Fax	248-641-0270

Name (Print/Type)	Jeffrey L. Snyder	Registration No. (Attorney/Agent)	43,141
Signature			Date
			SEPT. 11, 2003

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FEE TRANSMITTAL

for FY 2003

Patent fees are subject to annual revision.

 Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$ 640)

Complete if Known

Application Number	Unknown
Filing Date	Herewith
First Named Inventor	George S. Reppas, et al.
Examiner Name	Unknown
Group / Art Unit	Unknown

Attorney Docket No. 4447-000013

METHOD OF PAYMENT (check all that apply)

 Check Credit card Money Order Other None Order
 Deposit Account:

Deposit Account Number

08-0750

Deposit Account Name

Hamm, Dickey & Pierce, P.L.C.

The Commissioner is authorized to: (check all that apply)

 Charge fee(s) indicated below Credit any overpayments

 Charge any additional fee(s) during the pendency of this application

 Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.

FEE CALCULATION

1. BASIC FILING FEE

Large Entity Small Entity

Fee Code	Fee (\$)	Fee Code	Fee (\$)	Fee Description	Fee Paid
1001	750	2001	375	Utility filing fee	375
1002	330	2002	165	Design filing fee	
1003	520	2003	260	Plant filing fee	
1004	750	2004	375	Reissue filing fee	
1005	160	2005	80	Provisional filing fee	

SUBTOTAL (1)

(\$ 375)

2. EXTRA CLAIM FEES

Total Claims	-20 **	=	Extra Claims	Fee from below	Fee Paid
Independent Claims	45	=	25	X 9	= 225
	3	=	0	X	= 0
Multiple Dependent				X	= 0

Large Entity Small Entity

Fee Code	Fee (\$)	Fee Code	Fee (\$)	Fee Description	Fee Paid
1202	18	2202	9	Claims in excess of 20	
1201	84	2201	42	Independent claims in excess of 3	
1203	280	2203	140	Multiple dependent claim, if not paid	
1204	84	2204	42	** Reissue independent claims over original patent	
1205	18	2205	9	** Reissue claims in excess of 20 and over original patent	

SUBTOTAL (2)

(\$ 225)

FEE CALCULATION (continued)

3. ADDITIONAL FEES

Large Entity	Small Entity	Fee Code	Fee (\$)	Fee Description	Fee Paid
		1051	130	Surcharge - late filing fee or oath	
		1052	50	Surcharge - late provisional filing fee or cover sheet	
		1053	130	Non-English specification	
		1812	2,520	For filing a request for reexamination	
		1804	920*	Requesting publication of SIR prior to Examiner action	
		1805	1,840*	Requesting publication of SIR after Examiner action	
		1251	110	Extension for reply within first month	
		1252	410	Extension for reply within second month	
		1253	930	Extension for reply within third month	
		1254	1,450	Extension for reply within fourth month	
		1255	1,970	Extension for reply within fifth month	
		1401	320	Notice of Appeal	
		1402	320	Filing a brief in support of an appeal	
		1403	280	Filing a brief in support of an appeal	
		1451	1,510	Request for oral hearing	
		1452	110	Petition to institute a public use proceeding	
		1453	1,300	Petition to revive – unavoidable	
		1501	1,300	Petition to revive – unintentional	
		1502	470	Utility issue fee (or reissue)	
		1503	630	Design issue fee	
		1460	130	Plant issue fee	
		1807	50	Petitions to the Commissioner	
		1806	180	Processing fee under 37 CFR 1.17 (q)	
		8021	40	Submission of Information Disclosure Stmt	
		1809	750	Recording each patent assignment per property (times number of properties)	40
		1810	750	Filing a submission after final rejection (37 CFR § 1.129(a))	
		1801	750	For each additional invention to be examined (37 CFR § 1.129(b))	
		1802	900	Request for Continued Examination (RCE)	
				Request for expedited examination of a design application	

Other fee (specify) _____

*Reduced by Basic Filing Fee Paid

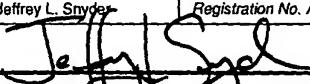
SUBTOTAL (3)

(\$ 40)

**or number previously paid, if greater; For Reissues, see above

SUBMITTED BY

Complete if Known

Name (Print/Type)	Jeffrey L. Snyder	Registration No. Attorney/Agent)	43,041	Telephone	248 641-1600
Signature					

Date **SEPT 11, 2003**

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